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Compassion Toward Self Versus Compassion Toward Others in People With Schizophrenia: Associations With Biomarkers and Mental, Cognitive, and Physical Health

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Background: People with schizophrenia (PWS) have impaired social cognition and deficits in empathy. Associations of compassion toward self (CTS) and compassion toward others (CTO) with health and biomarkers in PWS have not been investigated. Our hypotheses for this cross-sectional study of PWS and non-psychiatric comparison (NC) subjects were: 1) PWS have lower CTS and CTO scores. 2) Women have higher CTS and CTO. 3) CTS and CTO are related to mental, cognitive and physical health. We also explored the relationships of CTS and CTO with biomarkers.

Methods: The sample included 140 PWS and 131 age- and sex-comparable NCs (age range 26 to 65 years). We assessed CTS (Neff Scale) and CTO (Santa Clara Brief Compassion Scale) along with executive functioning, depression, mental and physical well-being. Blood-based biomarkers included lipids, hemoglobin A1c, and hs-CRP. We used t-tests, Spearman's correlations and general linear models.

Results: PWS had significantly lower CTS ($d=1.0$), but similar CTO ($d=.24$) as NCs. CTS was not significantly correlated with CTO. Women had higher CTO than and similar CTS as men in each group.

CTS, but not CTO, was significantly related to mental-well-being, depression, physical well-being with medium-large effect sizes; controlling for age, sex, and diagnostic group.

In NCs, CTS was associated with triglycerides ($r=-.34$, $p=.04$) and hemoglobin A1c ($r=-0.25$, $p=.19$). In PWS, CTO was associated with HDL cholesterol ($r=.27$, $p=.04$) and hs-CRP ($r=-.28$, $p=.03$).

Conclusions: Self-compassion has important links to health in PWS and NCs. Self-compassion-focused Interventions may have a role in improving mental and metabolic health in PWS.

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Keywords: Schizophrenia, Self-Compassion, Metabolic Dysregulation, Depression, Inflammation

Concordance of Parent-Offspring Cortico-Basal Ganglia White Matter Connectivity: The Role of Parental Depression and Parent-Child Bonding

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Background: Offspring of depressed parents show an increased risk for depression, as well as impaired social

cognition and interpersonal dysfunction. Given the key role of the cortico-basal ganglia (CBG) circuits in the formation and maintenance of social bonding, we examined concordance in white matter (WM) connectivity in CBG circuits between biological parents with and without lifetime-major depressive disorder (MDD) and their never-MDD offspring, and explored the effect of early parental bonding on neural concordance in high-risk dyads.

Methods: We imaged 26 parent-offspring dyads and investigated WM connections between basal ganglia seeds (accumbens, caudate, putamen and pallidum) and selected cortical regions involved in social cognition using diffusion tensor imaging (DTI) tractography. Lifetime-MDD was assessed using the Schedule for Affective Disorders. Offspring rated their perceived early parental care using the Parental Bonding Inventory.

Results: Overall, we found significant associations between parent's and offspring's strength of WM connections within the CBG circuits. Furthermore, in some CBG connections concordance was moderated by parent's lifetime-MDD, showing a diminished neural concordance among depressed parents and their never-MDD offspring. Within these dyads, high parental care predicted greater concordance of pallidum-temporal lobe connectivity.

Conclusions: Our preliminary findings provide the first evidence of concordance between parents and offspring in WM tracts implicated in social attachment, and that this concordance is diminished in families where the parent has MDD. This disruption may be a risk factor for the intergenerational transmission of psychopathology. Findings reveal the important role of early parental care in shaping the neural concordance among high-risk-dyads.

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Keywords: Depression, Diffusion Tensor Imaging (DTI), Parent-Child Dyads

Contributions of Psychosis-Risk and Sleep Quality to Dissociative Experiences

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Background: Dissociation is a psychological phenomenon that has been observed across the psychosis spectrum, including in individuals at clinical high risk (CHR) for psychosis. While individuals at CHR commonly report dissociative symptoms, few studies have examined why some individuals at CHR experience dissociation and some do not. Additionally, factors such as sleep disturbance, PTSD symptoms, and cannabis use have been associated with dissociation, all of which commonly occur in CHR individuals.

Methods: Dissociative symptoms, CHR status, sleep quality, cannabis use, and lifetime PTSD diagnosis were evaluated in 176 young adults, aged 18-24. Hierarchical linear regression analyses in SPSS were conducted to determine whether: 1) sleep quality, cannabis use, and PTSD independently